

Young Children's Responding to Interparental Conflict: Associations with Marital Aggression and Child Adjustment

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We designed this study to examine children's self-reported and observed emotional and behavioral responding to marital conflict as a potential mechanism linking marital physical aggression (as reported by the parents) and children's behavioral adjustment (as reported by their preschool teachers). In a sample of 48 preschoolers, parental marital physical aggression was positively associated with children's observed dysregulated responding to interparental conflict and negatively associated with children's self-reported behavioral disruption. Marital aggression and children's self-reported responding to marital conflict predicted teacher-reported behavior problems, with both variables adding unique variance. Our findings suggested a potential pathway linking exposure to marital conflict, children's regulatory strategies, and children's behavioral adjustment outside the home.

KEY WORDS: marital conflict; marital aggression; preschoolers; behavior problems.

Children of conflictual marriages are at risk for adjustment problems, including internalizing, externalizing, academic, interpersonal, and physical health problems (Grych & Fincham, 1990). In addition, exposure to marital conflict expressed physically (e.g., marital aggression) has particularly deleterious effects on children, beyond those accounted for by level of marital discord (Cummings & Davies, 1994). Although research has documented a link between poorly managed marital conflict and problematic child outcomes, the relation between these variables is far from perfect, and the processes and mechanisms underlying this

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relation are not well understood. Fincham (1994) highlighted the need for research to elucidate the familial and individual processes contributing to the difficulties experienced by the members of maritally conflictual families.

One promising model linking marital conflict to child outcomes has focused on children's responding to interparent anger and conflict. Interadult anger has been shown to be emotionally distressing and physiologically arousing for young children (e.g., El-Sheikh, Cummings & Goetsch, 1989) and to be associated with behavioral disruptions, such as aggression (e.g., Cummings, 1987). Further, children from conflictual marriages have been found to be particularly distressed by interadult anger (e.g., Cummings, Pellegrini, Notarius, & Cummings, 1989) and to intervene in such disputes (e.g., O'Brien, Margolin, John, & Krueger, 1991). In conceptualizing such findings, Cummings and colleagues have argued that children become sensitized to conflict. That is, rather than habituate, children of conflictual marriages become increasingly reactive to interadult anger (Cummings & Davies, 1994).

Young children's sensitization to interadult conflict has been well documented in the literature. However, to date, the majority of investigations have relied on analog designs. For instance, many studies of children's sensitivity to adult conflict have relied on videotaped interactions (e.g., Cummings, Davies, & Simpson, 1994) or staged conflicts between two adult strangers (e.g., Cummings, 1987) or between a stranger and a parent (e.g., Cummings et al., 1989). While a clear strength of these methods is the ability to experimentally control the conflict to which children are exposed, these designs do not allow for a complete understanding of children's responding to conflict between their own parents. That is, children's responding to hypothetical situations or to conflict between unfamiliar adults may or may not be representative of their responding to conflict within their own families. As such, an important next step is to complement analog studies with observational studies of children's responding to actual marital interaction. Margolin and colleagues have initiated such work in their studies of school-aged children. For instance, Gordis, Margolin, and John (1997) found that marital aggression history was associated with school-aged children's withdrawal, anxiety, and distraction during a laboratory-based family discussion task.

In addition, it is important to consider not only children's observed responding to marital conflict, but also their views of their experiences within their families. There is growing evidence that young children can reliably and validly report both on their own functioning (e.g., Measelle, Ablow, Cowan, & Cowan, 1998) and on their relationships (e.g., Bost, 1995). As such, objective measures of children's responding to marital conflict (e.g., observed responding in the laboratory setting) should be complemented with subjective reports of their own reactions. This approach would allow a fuller understanding of children's reactions to marital conflict.

Children's sensitivity to interparent anger may be one link between marital distress and children's adjustment problems. For instance, children's heightened

arousal may generalize to their functioning outside the family, undermining their ability to self-regulate affect and behavior across different settings (Cummings & Davies, 1994). However, the links between children's responding to marital conflict and their overall behavioral adjustment have rarely been studied. Notable exceptions include work by Davies and Cummings (1998) which identified links between marital discord, children's emotional reactivity to analog conflict, and children's internalizing and externalizing behavior, and by Margolin and colleagues which documented associations between school-aged children's responses to actual marital conflict and their behavior in the home (Gordis et al., 1997; O'Hearn, Margolin, & John, 1997).

Research has not examined the role of preschoolers' response to actual marital conflict in predicting their extrafamilial adjustment. Preschool children may be particularly vulnerable to marital conflict and aggression. Given that preschoolers continue to rely on parental support during emotionally taxing situations, their sensitivity to interparental discord may be particularly salient and detrimental. Further, the preschool years mark an important transition in the emergence of more independent emotional and behavioral self-control (e.g., Sroufe, 1996), which may be undermined by heightened sensitivity and reactivity to conflict and anger.

We examined preschoolers' emotional and behavioral responding to marital conflict in both maritally physically aggressive families and nonaggressive families. In order to examine reactivity across response domains, both behavioral observation and child self-report methods were used. Thus, this study is the first to provide both a window on preschoolers' views of their experiences and a snapshot of their observed response to actual marital disputes. We examined two major hypotheses. First, children of aggressive marriages were expected to demonstrate and to report heightened reactivity to marital conflict as compared to children of nonaggressive marriages. Second, their responding to marital conflict was expected to add to the prediction of their teacher-reported adjustment, beyond that accounted for by marital aggression.

METHOD

Participants

Forty-eight children (21 boys) and their mothers and fathers participated in a research session at a university laboratory in a semi-rural area in the Northeast. Each child was living with both parents at the time of the lab visit. The children were 4 years old ($M = 4$ years, 5 months, $SD = 3.48$ months); the mothers and the fathers averaged 33.7 years of age ($SD = 5.6$ years) and 35.58 years of age ($SD = 5.41$ years), respectively. The parents had an average of 2.3 children, including the target child. Families were recruited using newspaper advertisements and community flyers. The sample demographics reflected those of the surrounding community: the sample was 96% Anglo with a mean

annual income of \$41,901 in 1995 dollars ($SD = \$20,393$, range \$10,000 to \$135,000). Mothers averaged 15.5 years of education ($SD = 2.07$ years, range 12 to 20 years); fathers averaged 16.2 years of education ($SD = 2.47$ years, range 12 to 23 years).

Procedure

Participants in the study were involved in a larger research project on Conflict Resolution in Families. Only the tasks and measures relevant to the current study will be presented here. Following a brief opening interview, parents and children were escorted to separate interview rooms to complete self-report measures. Parents independently completed self-report measures of marital conflict. Under the supervision of research assistants, children completed a pictorial measure of emotional and behavioral responding to marital conflict.

The parents completed a marital discussion task (MDT; Lindahl, Clements, & Markman, 1997). The couple was asked to decide upon a relationship problem or issue to discuss in the presence of their child. They were instructed to handle this task as they might handle such a discussion at home. In preparation for the MDT, the children were seated at a small table and given crayons, paper, and stuffed animals. Children were informed that they would be in the room while their parents talked but received no further instructions. The couple was allowed ten minutes for their discussion, after which time they were interrupted and asked to take several minutes to wrap up. Both the marital couple and the child were videotaped during the MDT.

Following the lab visit, children's preschool teachers were asked to complete a child behavior questionnaire. The questionnaires were returned by 83% of the teachers ($n = 40$).

Measures

Conflict Tactics Scale (CTS; Straus, 1979)

The CTS is a widely used self-report measure of marital conflict resolution strategies. Both spouses reported on the frequency of their own behaviors and those of their partner over the past 12 months. A dichotomous variable was created to examine physically aggressive marital conflict. Couples were considered nonaggressive if neither spouse had engaged in any marital physical aggression. Couples were considered physically aggressive if one or both spouses reported at least one act of marital physical aggression in the past year. Following Straus (1990), physical aggression included such items as throwing something at the partner, pushing or shoving the partner, and beating up the partner. Of the 48 families, 24 reported at least one act of physical aggression within the past year.

A dichotomous variable was used rather than the relatively more continuous score obtainable from the CTS for two reasons. First, the physical aggression scores were significantly positively skewed (4.55 for husbands and 3.78 for wives), with medians and modes both equal to zero. Such a deviation from normality was not possible to correct with typical transformations (Tabachnick & Fidell, 1996). Second, physically aggressive marital conflict is particularly noxious for children (Cummings & Davies, 1994), thus suggesting a qualitative as well as a quantitative shift that occurs when couples resort to physical aggression in resolving disputes.

Behavioral Observation of Children's Coping and Affect Regulation (CAR; Martin, Clements, & Guttentag, 1998)

Children's emotional and behavioral responding during the marital discussion were coded with the CAR. This system was developed based on existing coding systems devised for assessing children's coping with marital conflict (e.g., Cummings, 1987), emotion regulation in the family (e.g., Lindahl & Markman, 1991) and children's interactions with peers (e.g., Gottman & Katz, 1989). Within this system, the presence of various behaviors is scored in 30-second intervals. Behaviors are summed across the interaction, and the sum is then expressed as a proportion of the total time. Thus, a score of .20 would indicate that the child engaged in a particular behavior during 20% of the 30-second segments of the MDT.

Two scales were empirically derived: Negative/Dysregulated Responding and Regulated Responding. The Negative/Dysregulated Responding scale included 6 behaviors (i.e., anger, aggression, agitation, defiance, overt sadness, and whining and complaining) and the Regulated Responding scale included 3 behaviors (i.e., self-soothing, support/comfort seeking, and distancing from the problem). The scales demonstrated good internal consistency, $\alpha = .75$ and $.74$ respectively, and were relatively uncorrelated in the current sample, $r(48) = .22$, $p = .14$.

Following training, coders independently coded the videotaped interaction task. Thirteen of these interaction tasks (27%) were double coded, and reliability was assessed using Cohen's κ . Obtained κ for individual codes averaged .82 (range .62 for self-soothing to .94 for agitation).

Reactions to Adult Conflict Tactics (REACTS; Dominguez, 1995)

The REACTS is a pictorial measure assessing young children's perceptions of their own emotional and behavioral responses to marital conflict. The measure utilizes a hierarchical, forced choice response format adopted from The Pictorial Scale of Perceived Competence and Acceptance for Young Children (Harter & Pike, 1984), and has been used with children as young as 3 years old (M. Dominguez, personal communication, September 1995). Children reported the extent to which

they responded to marital conflict in different ways. Parallel measures have been developed for boys and girls. Using both pictorial and questionnaire versions of the measure with a sample of 5–13 year olds, Dominguez (1995) reported internal consistencies of .58 to .81 for the subscales, and 2- to 4-week test-retest reliabilities of .40 to .71. Dominguez further found the REACTS to be correlated in expected directions with measures of marital conflict and child behavior problems.

Responses from children in the current study and in a second study (Clements, 1995) were combined and factor analyzed using principal axis factoring with oblique rotation. Examination of the scree plots of the obtained eigen values suggested a three factor solution. The resulting three scales were used in the current study. The first scale, Internalized Distress, included 6 items assessing children's guilty, somatic, and upset feelings in response to marital conflict. The second scale, Externalized Distress, included 12 items assessing children's angry or dysregulated behaviors in response to marital conflict. The third scale, Inappropriate Responsibility, included 8 items assessing children's mediation in parental disputes. Internal consistencies for these subscales were good to excellent, with values of .76, .90, and .70, respectively. The scales were moderately correlated in the current sample, r s from .48 to .66.

Conners Teacher Rating Scale (Conners, 1985)

On this measure, teachers rate the frequency of 39 child behavior problems on a 4-point scale, from *not at all* to *very much*. This measure is widely used and is considered to have adequate validity and reliability (Conners, 1985). The measure yields six factor scores that have been validated in previous research: Anxious-Passive, Asocial, Conduct Problem, Daydream-Attendance Problem, Emotional Overindulgent, and Hyperactivity. In the current study, the Asocial and Anxious-Passive scales had poor internal consistency ($\alpha = .55$ and $.56$, respectively), so they were omitted from all analyses. The remaining subscales possessed good to excellent internal consistency. The Conduct Problem scale ($\alpha = .90$) has 13 items assessing defiant and aggressive behaviors. The Daydream-Attendance Problem scale ($\alpha = .78$) includes 3 items assessing the child's attendance and ability to focus. The Emotional Overindulgent scale ($\alpha = .86$) is composed of 8 items tapping the child's proneness to negative affect. The Hyperactive scale ($\alpha = .86$) has 17 items assessing attention and activity level.

RESULTS

Means and standard deviations for study variables are presented in Table I. Preliminary analyses revealed no main or interaction effects of sex of child, so this

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Table I. Means and Standard Deviations for Children's Observed and Self-Reported Responding to Marital Conflict and Child Behavior Problems

	<i>M</i>	<i>SD</i>
CAR		
Negative/Dysregulated Responding	.31	.39
Regulated Responding	.23	.30
REACTS		
Internalized Distress	2.00	.74
Externalized Distress	2.14	.77
Inappropriate Responsibility	2.53	.65
Teacher-Reported Behavior Problems		
Hyperactivity	51.65	8.64
Conduct Problem	51.37	8.13
Emotional Overindulgent	52.32	9.89
Daydream/Attendance	51.97	12.95

variable was dropped from all further analyses. Children's self-reported responding to marital conflict (REACTS) and observed responding during the marital discussion task (CAR) were not significantly correlated, mean $r(48) = .10$, range from $-.003$ to $.21$, and thus were treated separately in all analyses.

Marital Aggression and Children's Responding to Marital Conflict

Bivariate correlations were computed to examine the associations between marital aggression status and children's observed and self-reported responding to marital conflict.

Observed Responding

As predicted, marital aggression status was associated with observations of children's Negative/Dysregulated Responding during marital aggression, $r(48) = .35$, $p = .02$. In contrast, marital physical aggression was not significantly associated with children's CAR Regulated Responding during the marital discussion task, $r(48) = .05$, $p = .73$.

Self-Reported Responding

Contrary to expectations, marital aggression status was inversely correlated with child-reported Externalized Distress on the REACTS, $r(48) = -.38$, $p = .008$. Physical aggression status was also negatively, though nonsignificantly, associated with Internalized Distress, $r(48) = -.18$, $p = .23$, and Inappropriate Responsibility, $r(48) = -.15$, $p = .31$.

Marital Aggression, Children's Responding to Marital Conflict, and Child Behavior Problems

The joint predictive power of marital aggression and children's responding to marital conflict was examined in a series of hierarchical multiple regressions. Separate hierarchical multiple regressions were performed for each scale of the Conners Teacher Rating Scale to test the hypothesis that children's responding to marital conflict would improve prediction of behavior problems beyond that obtained by marital aggression. In each regression, marital physical aggression status was entered at the first step, followed by indices of child responding to marital conflict. Marital aggression status was significantly associated with Hyperactivity, $\beta = .34$, $R^2 = .11$, $p = .03$, and Conduct Problems, $\beta = .34$, $R^2 = .11$, $p = .03$. Marital aggression status was not significantly associated with Emotional Overindulgent, $\beta = .28$, $R^2 = .08$, $p = .09$, or Daydream Attendance, $\beta = .23$, $R^2 = .05$, $p = .15$. Results for Step 2 of the regressions are presented in Table II.

Observed Responding and Behavior Problems

Contrary to predictions, children's observed responding to marital conflict did not improve prediction of teacher-reported behavior problems over that obtained with marital aggression. This was true for Hyperactivity, $R^2\Delta = .05$, $F(2, 36) = 1.17$, $p = .32$, Conduct Problems, $R^2\Delta = .02$, $F(2, 36) = .41$, $p = .67$, Emotional Overindulgence, $R^2\Delta = .07$, $F(2, 36) = 1.41$, $p = .26$, and Daydream-Attendance Problems, $R^2\Delta = .04$, $F(2, 36) = .87$, $p = .43$.

Table II. Standardized Regression Coefficients Predicting Teacher-Reported Behavior Problems from Marital Aggression and Children's Self-Reported and Observed Responding to Marital Conflict

Predictor variables	Hyperactivity	Conduct problem	Emotional overindulgent	Daydream attendance
Step Two				
CAR Negative/Dysregulated Responding	-.23	-.14	-.27	-.22
CAR Regulated Responding	.12	.07	-.03	.08
Final R^2	.17 ^a	.13	.14	.10
Step Two				
REACTS Internalized Distress	.39*	.39*	.28 ^a	.19
Final R^2	.26**	.26**	.15*	.09
Step Two				
REACTS Externalized Distress	.31 ^a	.22	.18	.12
Final R^2	.20*	.16*	.10	.07
Step Two				
REACTS Inappropriate Responsibility	.26 ^a	.23	.07	.02
Final R^2	.18*	.16*	.08	.06

^a $p < .10$.

* $p < .05$. ** $p < .01$. *** $p < .001$.

Self-Reported Internalized Distress and Behavior Problems

Children's Internalized Distress added significantly to the prediction of two indices of teacher-reported behavior problems, with greater self-reported guilty, somatic, and upset responses predicting more behavior problems. Children's Internalized Distress added significantly to the prediction of Hyperactivity, $R^2\Delta = .14$, $F(1, 37) = 7.19$, $p = .01$, and Conduct Problems, $R^2\Delta = .15$, $F(1, 37) = 7.25$, $p = .01$. Children's reports of Internalized Distress did not significantly improve prediction of Emotional Overindulgent problems, $R^2\Delta = .08$, $F(1, 37) = 3.28$, $p = .08$, or Daydream-Attendance problems, $R^2\Delta = .04$, $F(1, 37) = 1.41$, $p = .24$.

Self-Reported Externalized Distress and Behavior Problems

Children's self-reported Externalized Distress did not significantly add to the prediction of preschool teacher reports of behavior problems. This was true for Hyperactivity, $R^2\Delta = .08$, $F(1, 37) = 3.72$, $p = .06$, Conduct Problems, $R^2\Delta = .04$, $F(1, 37) = 1.85$, $p = .18$, Emotional Overindulgent, $R^2\Delta = .03$, $F(1, 37) = 1.14$, $p = .29$, and Daydream-Attention problems, $R^2\Delta = .01$, $F(1, 37) = .48$, $p = .50$.

Self-Reported Inappropriate Responsibility and Behavior Problems

Children's reports of mediation in and concern about parental marital disputes did not predict teacher-reported behavior problems. This was true for Hyperactivity, $R^2\Delta = .07$, $F(1, 37) = 2.91$, $p = .097$, Conduct Problems, $R^2\Delta = .05$, $F(1, 37) = 2.18$, $p = .15$, Emotional Overindulgent, $R^2\Delta = .004$, $F(1, 37) = .18$, $p = .67$, and Daydream-Attendance problems, $R^2\Delta = .0003$, $F(1, 37) = .02$, $p = .90$.

DISCUSSION

We addressed the links between marital aggression, children's responding to marital conflict, and children's adjustment. Specifically, children's observed and self-reported responding to interparental conflict was associated with history of marital physical aggression. Moreover, children's behavioral adjustment, as reported by their preschool teachers, was related both to marital physical aggression and to children's self-reported responding to marital conflict.

The first study goal was to examine preschoolers' responding to marital conflict. The methodology employed (i.e., observation of children's responding to actual marital conflict) was designed to complement analog studies by providing

information about children's emotional and behavioral responding within actual family contexts.

When exposed to marital conflict in a laboratory setting, children of aggressive marriages demonstrated heightened dysregulation as compared to children from nonaggressive marriages. These findings complement those obtained using experimental and analog designs, suggesting that children become sensitized to destructive forms of marital conflict and evidence heightened responding even in response to discussions that their parents report to be fairly positive.

These findings highlight the family environment as critical to understanding the function of children's patterns of responding to marital conflict. Specifically, preschoolers' heightened responding to marital conflict may serve several short-term functions in maritally distressed families. That is, seemingly dysregulated behaviors such as whining may be understood as children's bids for external support and structure. These behaviors may be difficult for parents to ignore and may result in parental attention to the child's immediate needs. In this way, preschoolers' emotional and behavioral responses may reduce immediate levels of marital conflict. Their heightened reactions may also alert parents to their children's distress, resulting in efforts to shield children from overt displays of conflict. The ability of preschoolers to at least temporarily derail marital conflict has been documented in the literature (Covell & Miles, 1992).

In addition to observation, we used a self-report measure to assess children's reactions to marital conflict. Internal consistency analyses suggested that preschoolers provided coherent information about their own responding to their parents' marital disputes. However, in contrast to expectations, children of aggressive marriages reported less externalized distress in response to marital conflict than did children of nonaggressive marriages.

At first glance, these findings would seem to stand in contrast to the findings obtained using observational methods, as well as to a large body of literature suggesting that children of conflictual marriages experience heightened distress in response to conflict. However, one way to reconcile the discrepancy between children's observed and self-reported responding to marital conflict is to consider that for preschoolers exposed to more extreme expressions of marital distress (i.e., physical aggression), regulatory processes may include strategies to deny the emotional impact of this stressor. That is, although children of aggressive marriages display heightened emotional and behavioral responding to marital conflict, they also may attempt to minimize their own distress and behavioral disruption. As Thompson and Calkins (1996) argued, for such children, self-regulation may involve critical "tradeoffs" not evident when studying children in non-risk conditions. Explicitly, children in conflictual marriages may employ regulatory processes that promote both risk and adaptation. These preschoolers, dysregulated by their parents' conflict, may be attempting to maintain a sense of control and well-being by expressly denying their distress and behavioral disruption.

In addition, preschoolers' attempts to minimize the impact of marital conflict should be understood developmentally. Minimization may be one of the few strategies available to preschoolers. Unlike older children, preschoolers are dependent on parents for supervision and thus may be denied the ability to avoid marital conflict (e.g., by going to a friend's house). Additionally, preschoolers have fewer opportunities for extrafamilial social support, and their inability to acknowledge conflicting feelings directed toward the same target (Harter & Buddin, 1987) may further motivate denial of familial negativity.

It is also important to note that the Externalized Distress scale includes angry behaviors (e.g., "get mad," "get into fights with brothers, sisters, or friends"). By denying responding to marital conflict in these ways, preschoolers may be attempting to present their behavior as prosocial and well controlled. Young children may view such behavior as important to their own well-being within the family and may even believe that improvements in their behavior would reduce marital negativity (Thompson & Calkins, 1996). In addition, they may fear becoming targets of parental negativity, a reasonable fear given that child abuse and marital physical aggression are correlated (for a review, see Cummings & Davies, 1994).

Most importantly, the function of children's self-reported denial of behavioral disruption does not depend on whether or not they actually inhibit misbehavior. The value that children place on behaving prosocially does not necessarily translate into an ability to do so. Their reports of less misbehavior in response to conflict may reflect their desire to behave in positive ways.

A second study aim was to examine the links between marital aggression, children's emotional and behavioral responding to marital conflict, and children's behavioral adjustment as reported by their teachers. Consistent with previous research, marital physical aggression was associated with children's undercontrolled behavior. Moreover, children's self-reported responding added to the prediction of their behavior problems, with more affective distress associated with more hyperactivity and conduct problems. Children's heightened reactivity within their family context may generalize to other settings, impairing their ability to effectively modulate their own behavior and emotions. As Davies and Cummings (1998) suggested, heightened vigilance evidenced by children exposed to marital conflict may tax their regulatory abilities, and over time, increase their risk for psychopathology and adjustment difficulties.

These findings lend support to the possibility that children's attempts to deny the emotional impact of their parents' marital conflict may serve a short-term, protective function with respect to their adjustment. Specifically, children's reports of less affective distress were related to fewer teacher-reported behavior problems, even though their observed responding was unrelated to teacher-reported behavior problems. Thus, children's perceptions of marital conflict appear to be an integral aspect of their self-regulation both within and outside the family.

Our study represents an important step in understanding the links between marital conflict and preschoolers' adjustment. By examining preschoolers' observed and self-reported responses to marital conflict, the current study extends a growing body of literature examining the relations between marital distress and children's adjustment difficulties. However, future research is needed to more fully examine preschoolers' self-reports of their reactions to marital discord. In this study, the reliability and validity of such accounts was supported by the internal consistency of the REACTS and by the associations between the REACTS and teacher-reported behavior difficulties. However, given the novelty of including preschoolers as informants of their own functioning, findings obtained using this approach will require empirical replication.

In addition, the long-term trajectories of children's emotional and behavioral regulation strategies should be investigated. Although a pattern of heightened responding to marital conflict may allow preschoolers some immediate influence and control over marital conflict, studies conducted with school-aged children suggest that there are likely long-term costs for children in such families. Although preschoolers' attempts to deny their own dysregulation in response to parental marital conflict may allow for a sense of control and security in the short-term, it is likely that this strategy becomes less viable over time, and may ultimately decrease their sense of self-efficacy and well-being (cf., Thompson & Calkins, 1996). Parents of preschoolers respond to their children's bids for attention and support, but parents of older children are less responsive to their intervention attempts (Covell & Miles, 1992). This decrease in parental responsivity could ultimately be more difficult for children who must adapt previously effective coping strategies.

Finally, the current community sample was predominantly Anglo, well-educated, and rural, thus limiting the generalizations that may be made. Future research is needed to replicate these findings in more ethnically diverse and urbanized areas. As well, only six children had clinically elevated behavior problems, with five of these children from aggressive marriages.

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